Orissa. Bihar and Madhya Pradesh during the last three years is as under:—

	Number of deaths		
	"T986	1987	1988
Bihar .	53	74	34
Madhya Pradesh N.A.		72	134
Orissa . 14		153	489

During 1989, the number of deaths reported from these Stetes are as under: —

Bihar .	185 (upto 10-4-1989)
Madhya Pradesh	158 (upto 3-4-1989)
Orissa .	344 (upto 2-4-1989)

The control measures for Meningococcal Meningitis consists of the following;

—early reporting of cases by para-medical health personnel so that all suspected cases are treated in hospitals;

—constituting medical teams to visit the affeted areas to detect and diagnose cases;

—treatment of patients by prov4ding suitable drugs viz. Crystalline Benzyl Penicillin and Chloramphenicol;

—vaccination of medical and para-medical personnel who attend patients in hospitals and casualty departments;

providing -protection to persons who may come into, contact wifH patients by giving them sulphadiazine.

The National Institute of Communicable Diseases"'had deputed experts to visit the affected districts of Orissa, Bihar and Madhya Pradesh and also advised-the State -Governments regarding surveillance and treatment.

The units of the Central CouneS 0* Research in Homoeopathy in Orissa, Bihar and Madhya Pradesh have also been activated to undertake study-cum-treatment of Meningitis cases with homoeopathic medicines.

The Government of India is in constant touch with the State Governments and is providing technical advice and also arranging the supply of vaccines for use among close contacts like medical and para-medical personnel engaged in patients care and members of families of patients.

Winding up of NMEP

39. SHRI JAGADISH JANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) whether Government have recently taken a decision to wind up the National Malaria Eradication Programme;

(b) if so, the reasons therefore;

(c) whether any alternative programme is proposed to be implemented by Government to eradicate Malaria; and

(d)' if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY. WELFARE (KUMARI SAROJ KHAPARDE): (a) No, sir

to (d) Does hot arise.

खसरे और टिटनेस इत्यादि के कारण राजस्थान में बच्चों की मृत्यु

*40. श्री संतोष बागड़ोदिया : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि राजस्थान में हर साल पांच वर्ष से कम आयु के बहुत से बच्चों की मृत्यु खसरा, टिटनेस, गलाघोंटू, काली खांसी, तपेदिक और मीजिया के कारण हो जाती है ;